

COMMONWEALTH OF MASSACHUSETTS
HEALTH POLICY COMMISSION

**Registration of Provider Organizations
Training**

Initial Registration: Part 2



Agenda

- Background
- Initial Registration: Part 2
- Online Submission Platform
- Questions



Background

RPO Program Recap

We are the **Health Policy Commission**, an independent state agency that develops policy to reduce health care cost growth and improve the quality of patient care

Chapter 224 charged the HPC with developing and implementing the RPO Program

Provider Organizations subject to the law must register with the HPC **every two years** and complete an **annual filing with CHIA**

The HPC **divided Initial Registration into two parts** in the first year of the program. Provider Organizations submitted their Part 1 information in November 2014

This presentation will review the **Part 2 requirements**

HPC Registration Cycle



Goals of Part 1

**Identify Provider Organizations
subject to the law**

**Gain general
understanding of
registrants' size and
structure**

**Allow Provider Organizations
to familiarize themselves with
requirements**

**Come to agreement on reportable
corporate affiliates and
contracting affiliates before
requiring additional data**

Goal of Part 2

**Care delivery
innovation**

**Tracking and
evaluating
system-wide
and provider-
specific trends**

**Create a relational database
by collecting information
about each Provider
Organization and its
relationships with other
Providers**

**Health
Resource
Planning**

**Evaluating
market
changes**

Program Structure



Registration of Provider Organizations

Many data elements have been removed from the proposed DSM or redesigned to reduce administrative burden.

Removed	
	Operational Organizational Chart
	Corporate Affiliate Address
	Participation Agreement Start Date
	Participation Agreement End Date
	Administrative Fees, Retention, Dues
	Direction of Fees, Retention, Dues
	Licensing Entity
	Reporting of Unlicensed Sites
	Reporting of Unowned Facilities
	Compensation Part of Clinical Affiliation
	Description of Compensation
	Agreement End Date

Redesigned	
	Description of Governance Structure
	Funds Flow
	Contracting Affiliations File Structure
	Books of Business by Payer/Product
	Provider FTE Information
	Reportable Clinical Affiliations
	Agreement Start Date

	Background Information File
	Corporate Affiliations File
	Contracting Affiliations File
	Facility File
	Clinical Affiliations File

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Initial Registration: Part 2

Part 2 Process

Materials are due by **October 30, 2015**

Materials must be submitted through the **online submission platform**, which will open in August

The HPC strongly encourages scheduling a **one-on-one meeting** with program staff

The HPC will periodically post **Frequently Asked Questions** online

The Provider Organization will receive its **notice of successful registration** once the HPC has reviewed and approved its Part 2 materials

Certain changes to your structure may trigger a required **off-cycle update** – contact program with questions

We are always happy to answer questions: HPC-RPO@state.ma.us

Initial Registration: Part 2

Required Files

- ☐ Background Information File
- ☐ Corporate Affiliations File
- ☐ Contracting Affiliations File
- ☐ Contracting Entity File
- ☐ Facilities File
- ☐ Physician Roster
- ☐ Clinical Affiliations
- ☐ File Attachments

- ➔ Overview of File
- ➔ Key Definitions
- ➔ File Content
- ➔ Input Method
- ➔ Questions

Background Information File – Overview

Background Information File	
Description:	Includes identifying information about the Provider Organization and acts as a cover sheet to the application
Extension of Part 1 File:	Yes
Input Type:	Manual entry only
Applicable to All Provider Organizations:	Yes

Background Information File – New Content

**RPO-25
-
RPO-30**

Secondary Reporter

See p. 14-15 of DSM

- Provide the name and contact information for the second person that your organization has designated as its contact for the RPO Program

RPO-40

Description of Community Advisory Boards

See p. 17 of DSM

- Community Advisory Boards include patient and family advisory and community benefit advisory boards
- If your organization provides information about one of its community advisory boards to the AGO, you may state this instead of describing that board
- If your organization does not have community advisory boards, select the appropriate checkbox

Background Information File – New Content

RPO-41

Governance Filing Requirements

See p. 17 of DSM

- Indicate whether your organization is in compliance with all applicable registration and filing requirements of the Corporations Division of the Secretary of the Commonwealth and the Non-profit/Charities Division of the Office of the Attorney General

RPO-42

Applicable Files

See p. 17 of DSM

- Use this question to indicate which files are applicable to your organization

Background Information File – Input Method

Part 1 Data



Will be prepopulated in the online submission platform



Please review these data and make updates if necessary

Part 2 Data



Must be entered manually from within the online submission platform

Corporate Affiliations File – Overview

Corporate Affiliations File	
Description:	Includes identifying information about each of the Provider Organization's corporate affiliates
Extension of Part 1 File:	Yes
Input Type:	Manual entry or Microsoft Excel template import (recommended)
Applicable to All Provider Organizations:	Yes

Corporate Affiliations File – Key Definitions

Contracting Entity

An Entity that negotiates, represents, or otherwise acts to establish contracts with Carriers or Third-Party Administrators for the payment of Health Care Services.

Corporately Affiliated Contracting Entity

A Contracting Entity with which the Provider Organization has a Corporate Affiliation.

Third-Party Contracting Entity

A Contracting Entity with which the Provider Organization does not have a Corporate Affiliation and which establishes at least one contract with Carriers or Third-Party Administrators on behalf of at least one of the Provider Organization's corporate affiliates.

Corporate Affiliations File – New Content

RPO-46

**Corporate Affiliate Zip
Code**

See p. 20 of DSM

- Enter the 5-digit zip code of the primary physical address for each corporate affiliate

RPO-47

**Corporate Affiliate Tax-
Exempt Status**

See p. 20 of DSM

- Indicate whether the IRS recognizes the corporate affiliate as tax-exempt

RPO-48

**Contracting Entity
(Contractor) Status**

See p. 20 of DSM

- Indicate whether the corporate affiliate establishes contracts with Carriers or Third-Party Administrators
- These corporate affiliates are your Corporately Affiliated Contracting Entities

Corporate Affiliations File – New Content

RPO-49

**Legal Name of
Corporately Affiliated
Contracting Entity**

See p. 20 of DSM

- Indicate which of your Corporately Affiliated Contracting Entities establish contracts with Carriers or TPAs on behalf of the corporate affiliate
- If the corporate affiliate does not provide direct patient care services, select the appropriate checkbox
- If the corporate affiliate has at least one contract that was established by a Third-Party Contracting Entity, select the appropriate checkbox

Corporate Affiliations File – New Content

RPO-49

Legal Name of
Corporately Affiliated
Contracting Entity

Example Answer	
RPO-43: Name of Corporate Affiliate	Acute Hospital
RPO-49: Legal Name of Corporately Affiliated Contracting Entity	<div><div><input checked="" type="checkbox"/> [Unique Answer 1]: Acute Hospital</div><div><input checked="" type="checkbox"/> [Unique Answer 2]: PHO</div><div><input type="checkbox"/> Contract(s) established by a Third-Party Contracting Entity</div><div><input type="checkbox"/> Does not provide direct patient care services</div></div>

Corporate Affiliations File – New Content

RPO-50

Legal Name of Third-Party Contracting Entity

See p. 21 of DSM

- If the corporate affiliate has at least one contract that is established by a Third-Party Contracting Entity, enter the legal name of the Third-Party Contracting Entity
- If not applicable to the corporate affiliate, leave this question blank

RPO-51

Third-Party Contracting Entity EIN

See p. 21 of DSM

- Enter the 9-digit EIN for the Third-Party Contracting Entity
- If not applicable to the corporate affiliate, leave this question blank

Corporate Affiliations File – New Content

RPO-52

Organization Type

See p. 21 of DSM

- Select the corporate affiliate's organization type
- You may select multiple answers for each affiliate
- Definitions of each organization type are available in the DSM (See p. 25)

RPO-53

**Organization Type -
Subcategories**

See p. 22 of DSM

- This question is only applicable if you selected "Direct Provider of Patient Care Services" in RPO-52

Corporate Affiliations File – New Content

RPO-54

Internal Corporate Parent(s)

See p. 22 of DSM

- Enter the name of the corporately affiliated Entity that directly owns or controls the corporate affiliate, whether fully or partially
- This question will be prepopulated in the online submission platform based on the information you provided on your corporate organizational chart, where possible
- Please review this information for accuracy and make updates as necessary

RPO-55

Level of Ownership or Control

See p. 22 of DSM

- Select the option that best characterizes the internal corporate parent's level of ownership or control
- This question will be prepopulated in the online submission platform based on the information you provided on your corporate organizational chart, where possible

Corporate Affiliations File – New Content

RPO-56

External Corporate Parent(s)

See p. 23 of DSM

- Enter the name of the external Entity that directly owns or controls the corporate affiliate, whether fully or partially
- If the corporate affiliated is owned by more than six external entities, select the appropriate checkbox

RPO-57

External Corporate Parent EIN

See p. 23 of DSM

- Enter the 9-digit EIN of the external corporate parent

RPO-58


Level of Ownership or Control of Corporate Affiliate

See p. 23 of DSM


- Select the option that best characterizes the external corporate parent's level of ownership or control

Corporate Affiliations File – Input Method


Part 1 Data



Will be prepopulated in the online submission platform




Please review these data and make updates if necessary




RPO-54 and RPO-55 will be prepopulated based on the information you submitted on your corporate organizational chart


Part 2 Data




Each Provider Organization received a customized Microsoft Excel template with the information you submitted in Part 1



Complete the Microsoft Excel template by typing your answers to RPO-46 through RPO-48 into the Excel file



Upload the completed template into the online submission platform



Complete the rest of the Corporate Affiliations file by manually entering the data in the online submission platform

Contracting Affiliations File – Overview

Contracting Affiliations File	
Description:	Includes identifying information about each of the Provider Organization's contracting affiliates
Extension of Part 1 File:	Yes
Input Type:	Manual entry Microsoft Excel template import
Applicable to All Provider Organizations:	No

Contracting Affiliations File – New Content

RPO-62

Organization Type

See p. 29 of DSM

- Select the contracting affiliate's organization type
- You may select multiple answers for each affiliate

RPO-63

**Legal Name of
Corporately Affiliated
Contracting Entity**

See p. 29 of DSM

- Indicate which of your Corporately Affiliated Contracting Entities establish contracts with Carriers or TPAs on behalf of the contracting affiliate

Contracting Affiliations File – Input Method

Part 1 Data



Will be prepopulated in the online submission platform



Please review these data and make updates if necessary

Part 2 Data



Each Provider Organization received a customized Microsoft Excel template with the information you submitted in Part 1



Complete the Microsoft Excel template by typing your answers into the Excel file



Upload the completed template into the online submission platform



If you prefer to enter this information manually into the online submission platform, you may disregard the Excel template

Contracting Entity File – Overview

Contracting Entity File	
Description:	Includes information about each of the Provider Organization's Corporately Affiliated Contracting Entities
Extension of Part 1 File:	No
Input Type:	Manual entry
Applicable to All Provider Organizations:	Yes

Contracting Entity File – Content

RPO-64

**Legal Name of
Corporately Affiliated
Contracting Entity**

See p. 31 of DSM

- You will complete this file for each of your Corporately Affiliated Contracting Entities
- This question will be automatically prepopulated with the names of each corporate affiliate that you identified as being a Contracting Entity in RPO-48

RPO-65

**Payers with Which the
Contracting Entity
Contracts**

See p. 31 of DSM

- Select the payer groups with which the Contracting Entity establishes at least one contract

Private Commercial

- ☐ Private commercial with BCBS, HPHC, and/or THP
- ☐ Other private commercial

Medicare

- ☐ Medicare ACOs (e.g., Pioneer ACO, MSSP, Next Generation ACO)
- ☐ Medicare Advantage

Medicaid

- ☐ Medicaid Managed Care

Contracting Entity File – Content

RPO-66

Contracting for Affiliated Providers

See p. 31 of DSM

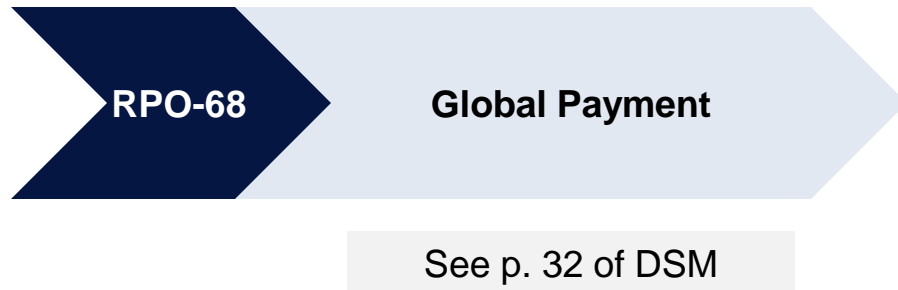
- Indicate whether the Contracting Entity establishes contracts on behalf of a Health Care Professional that it, or a corporate affiliate, does not employ, or on behalf of a Provider with which the Contracting Entity does not have a Corporate Affiliation
- If you were not required to list contracting affiliates because your Contracting Entity only has a relationship with individual physicians, rather than with medical groups (e.g., through PPAs), you should select “Yes”

Contracting Entity File – Content



- If the Contracting Entity establishes contracts on behalf of Health Care Professionals that it, or a corporate affiliate, does not employ, or on behalf of a Provider with which the Contracting Entity is not corporately affiliated, indicate which services you offer to these individuals or organizations
 - ☐ Administrative Support: Billing
 - ☐ Administrative Support: General
 - ☐ Care Management
 - ☐ Carrier Contract Management
 - ☐ Information Technology
 - ☐ Other Management
 - ☐ Professional Training
 - ☐ None of the above
- Examples of services in the DSM (see page 36)

Contracting Entity File – Content



- Indicate whether the Contracting Entity establishes contracts that include Global Payments for participating Providers or Provider Organizations
 - ☐ The Contracting Entity only establishes contracts with Global Payments through which it is eligible for surpluses, but is not responsible for deficits.
 - ☐ The Contracting Entity establishes contracts with Global Payments through which it is eligible for surpluses and responsible for deficits.
 - ☐ The Contracting Entity does not establish any contracts that include a Global Payment.
- If the Contracting Entity does not establish any contracts that include a Global Payment (option 3), skip to question RPO-73

Contracting Entity File – Content

RPO-69

Global Payments – Eligibility for Surplus

See p. 33 of DSM

- Indicate the types of Providers that are eligible for surplus under at least one of the Contracting Entity's Global Payment arrangements
 - This question is limited to Global Payment arrangements that were negotiated by the Corporately Affiliated Contracting Entity for which you are completing the question
- ☐ Primary Care Physicians
 - ☐ Specialists – Behavioral Health
 - ☐ Specialists – Non-Behavioral Health
 - ☐ Hospital(s)
 - ☐ Post-Acute
 - ☐ Ancillary
 - ☐ Other
 - ☐ None of the above

Contracting Entity File – Content



- Indicate the types of Providers that are responsible for deficits under at least one of the Contracting Entity's Global Payment arrangements
- This question is limited to Global Payment arrangements that were negotiated by the Corporately Affiliated Contracting Entity for which you are completing the question
 - ☐ Primary Care Physicians
 - ☐ Specialists – Behavioral Health
 - ☐ Specialists – Non-Behavioral Health
 - ☐ Hospital(s)
 - ☐ Post-Acute
 - ☐ Ancillary
 - ☐ Other
 - ☐ None of the above
- If the Contracting Entity only establishes contracts with Global Payment arrangements through which it is eligible for surplus, but not responsible for deficit, skip this question

Contracting Entity File – Content

RPO-71

Global Payments – Withholds

See p. 34 of DSM

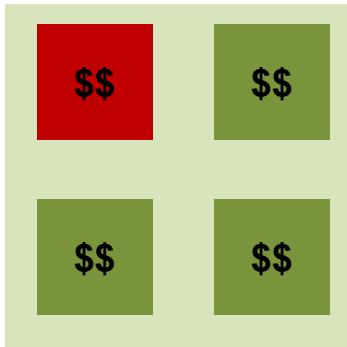
- Indicate if and how the Contracting Entity uses withholds with regard to its subdivisions or to individual physicians
 - ☐ In the case of organizational surplus, the Contracting Entity returns withholds to all subdivisions (or individual physicians).
 - ☐ In the case of organizational surplus, the Contracting Entity returns withholds only to subdivisions that meet performance metrics (or individual physicians that meet performance metrics).
 - ☐ In the case of organizational deficit, the Contracting Entity does not return withholds to any subdivision (or individual physicians).
 - ☐ In the case of organizational deficit, the Contracting Entity returns withholds only to subdivisions that meet performance metrics (or individual physicians that meet performance metrics).
 - ☐ The Contracting Entity uses other methods to determine whether to return withholds.
 - ☐ Not applicable; the Contracting Entity does not use or make decisions about the return of withholds.
- If the Contracting Entity only establishes contracts with Global Payment arrangements through which it is eligible for surplus, but not responsible for deficit, skip this question

Contracting Entity File – Content

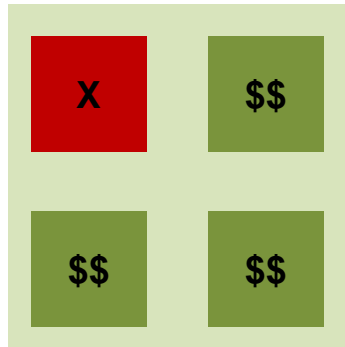
RPO-71

Global Payments – Withholds

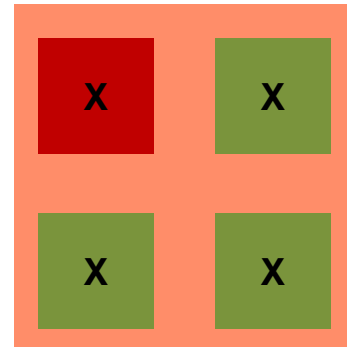
In the case of **organizational surplus**, the Contracting Entity returns withholds to all subdivisions (or individual physicians).



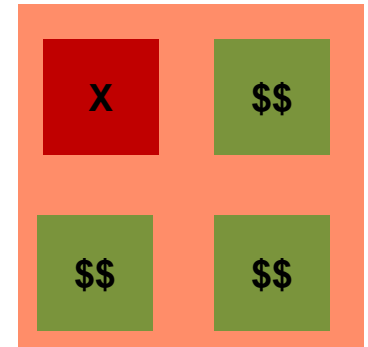
In the case of **organizational surplus**, the Contracting Entity returns withholds only to subdivisions that meet performance metrics (or individual physicians that meet performance metrics).



In the case of **organizational deficit**, the Contracting Entity does not return withholds to any subdivision (or individual physicians).



In the case of **organizational deficit**, the Contracting Entity returns withholds only to subdivisions that meet performance metrics (or individual physicians that meet performance metrics).



= Organizational surplus

= Met performance metrics

\$\$ = Withhold returned

= Organizational deficit

= Did not meet performance metrics

X = Withhold not returned

Contracting Entity File – Content

RPO-72

Global Payments – Distribution of Surplus/Deficit

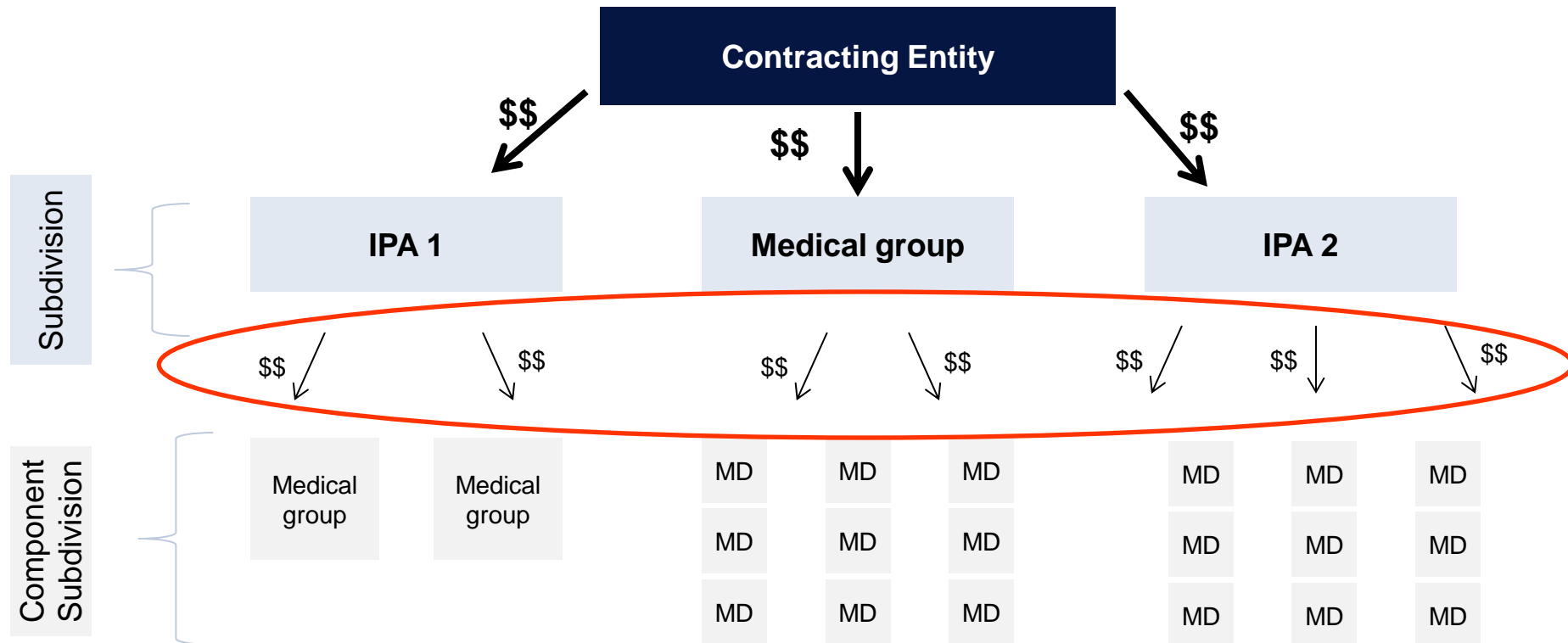
See p. 34 of DSM

- Indicate how the Contracting Entity determines the methodology by which subdivisions distribute funds and/or deficit responsibility to their component subdivisions
 - ☐ The Contracting Entity determines the method by which subdivisions allocate surplus and/or deficit.
 - ☐ The Contracting Entity sets standards regarding allocation of surplus and/or deficit that subdivisions must follow.
 - ☐ Subdivisions are required to inform the Contracting Entity how they decide to allocate surplus and/or deficit.
 - ☐ The Contracting Entity does not have any subdivisions and therefore the Contracting Entity makes all decisions about allocation of surplus and/or deficit to individual physicians.
 - ☐ None of the above.

Contracting Entity File – Content



Example Subdivision Structure



Contracting Entity File – Content

RPO-73

Upload Physician Roster

See p. 35 of DSM

- Indicate how you are providing the Physician Roster for this Contracting Entity
- Abbreviated applicants do not have to provide a Physician Roster
- If you have multiple Contracting Entities that establish contracts on behalf of the same group of physicians, you may be able to submit a single physician roster. Please set up a one-on-one meeting if you wish to pursue this option.

Contracting Entity File – Input Method

Part 1 Data



N/A

Part 2 Data



Must be entered manually from within the online submission platform

Facilities File – Overview

Facilities File	
Description:	Includes information about each of the Provider Organization's licensed facilities
Extension of Part 1 File:	No
Input Type:	Manual entry Microsoft Excel template import
Applicable to All Provider Organizations:	No

Facilities File – Key Definitions

Facility

A licensed institution providing Health Care Services or a health care setting, including, but not limited to, hospitals and other licensed inpatient centers, ambulatory surgical or treatment centers, skilled nursing centers, residential treatment centers, diagnostic, laboratory and imaging centers, and rehabilitation and other therapeutic health settings.

Campus

The physical area immediately adjacent to the provider's main buildings and other areas and structures that are not strictly contiguous to the main buildings but are located within 250 yards of the main buildings.

Facilities File – Content

- **In the Facilities file, you must report each licensed Facility with which you are corporately affiliated**
 - You are not required to report unlicensed sites
 - You are not required to list Facilities with which you are not corporately affiliated

- **Each entry in the Facilities file represents a location, rather than a license**
 - If a building holds multiple licenses (e.g., an Acute Hospital license and Mental Health Facility license), you are only required to list it once
 - If a Facility has multiple satellite locations covered by the same license, the locations must be listed separately
 - A Campus may be reported as a single entry in the Facilities file, provided that the licensed buildings, areas, and structures are operating under a single license

Facilities File – Content

RPO-74

Name(s) of Facility

- Enter all commonly used names of the Facility

See p. 40 of DSM

RPO-75

**Facility Employer
Identification Number**

- Enter the 9-digit EIN under which the Facility operates

See p. 40 of DSM

RPO-76

**Facility National
Provider Identifier**

- Enter each organizational NPI associated with the Facility

See p. 41 of DSM

Facilities File – Content

**RPO-77
–
RPO-82**

Facility Address

- Enter the full address for the Facility

See p. 41 of DSM

RPO-83

License Number(s)

- Enter the Facility's license number(s)

See p. 41 of DSM

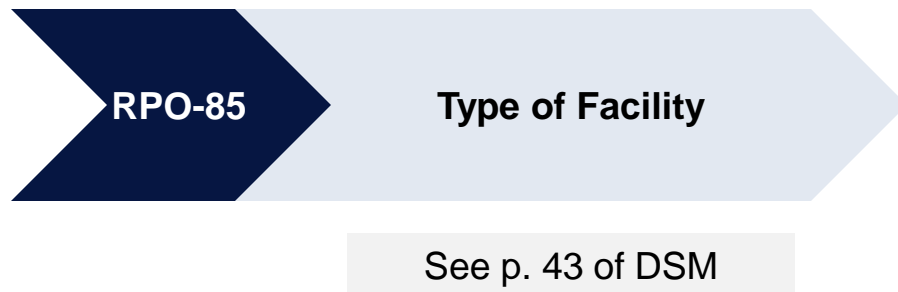
RPO-84

License Type(s)

- Indicate the license type(s) for the Facility

See p. 42 - 43 of DSM

Facilities File - Content



- This question is only applicable to Facilities with a **Clinic license**
- Indicate which type(s) of facility your clinic is
 - ☐ Ambulatory Surgery Center (68)
 - ☐ Community Mental Health Center (69)
 - ☐ Dental Clinic (70)
 - ☐ Federally Qualified Community Health Center (71)
 - ☐ Freestanding Diagnostic Imaging Center (72)
 - ☐ Freestanding Urgent Care Center (73)
 - ☐ Limited Services Clinic (74)
 - ☐ Satellite Emergency Facility (75)
 - ☐ General Clinic / Other (76)
- If you are using the Microsoft Excel template to complete this file, enter the two-digit answer codes in parentheses into the appropriate cell, separated by a semicolon

Facilities File - Content

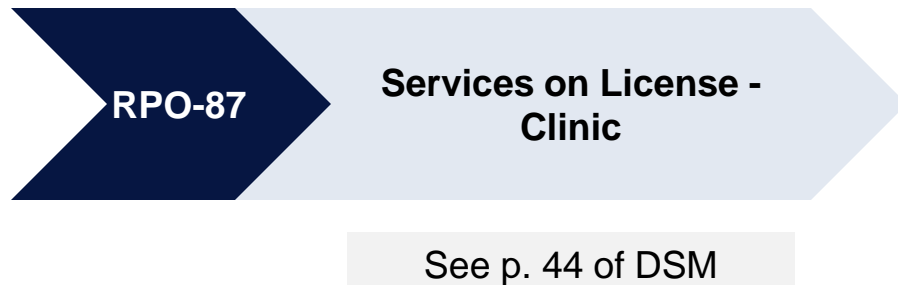
RPO-86

Provider-Based Status

See p. 44 of DSM

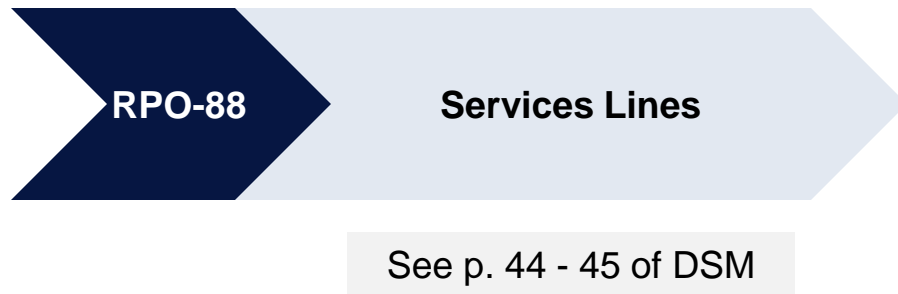
- This question is only applicable to Facilities with a **Clinic license** or an **Acute Hospital – Satellite** license
- Indicate whether the Facility is billed to Medicare as a provider-based organization
- If your facility does not bill Medicare, select “No”

Facilities File – Content



- This question is only applicable to Facilities with a **Clinic license**
- Select the services that the Facility is licensed to provide:
 - ☐ Medical (77)
 - ☐ Surgical (78)
 - ☐ Dental (79)
 - ☐ Mental Health (80)
 - ☐ Physical Rehabilitation (81)
 - ☐ Substance Abuse (82)
 - ☐ Birth Center (83)
 - ☐ Mobile Medical (84)
 - ☐ Radiology (MRI) (85)
 - ☐ Pharmacy (86)
 - ☐ Limited Services (87)
- If you are using the Microsoft Excel template to complete this file, enter the two-digit answer codes in parentheses into the appropriate cell, separated by a semicolon

Facilities File – Content



- This question is only applicable to:
 - Facilities with an **Acute Hospital - Satellite license**
 - Facilities with a **Clinic license** that are licensed to perform **medical services**
- Select the service line(s) available at the Facility
- When answering this question, consider the services available to patients, rather than the types of physicians at the Facility
 - A Facility that offers pathology services should select “Pathology” even if they do not have a pathologist on site
- If you are using the Microsoft Excel template to complete this file, enter the two-digit answer codes in parentheses into the appropriate cell, separated by a semicolon

Facilities File – Content

RPO-89

Facility Type – Non-Acute Hospital

See p. 46 of DSM

- This question is only applicable to Facilities with a **Non-Acute Hospital license**
- Indicate which type(s) of facility your Non-Acute Hospital is
 - ☐ Long-Term Acute Care Hospital (120)
 - ☐ Psychiatric Hospital (121)
 - ☐ Rehabilitation Hospital (122)
 - ☐ Other (123)
- If you are using the Microsoft Excel template to complete this file, enter the two-digit answer codes in parentheses into the appropriate cell, separated by a semicolon

Facilities File – Input Method

Part 1 Data



N/A

Part 2 Data



Complete the Microsoft Excel template by typing your answers into the Excel file



Upload the completed template into the online submission platform



If you prefer to enter this information manually into the online submission platform, you may disregard the Excel template

Physician Roster File – Overview

Physician Roster File	
Description:	Includes information about each physician on whose behalf the Corporately Affiliated Contracting Entity establishes contracts with Carriers or Third-Party Administrators
Extension of Part 1 File:	No
Input Type:	Microsoft Excel file attachment
Applicable to All Provider Organizations:	No – abbreviated applicants exempted

Physician Roster File – Key Terms and Explanations

- A **practice site** is the physical location where the physician is providing direct patient care services
 - This site may or may not be owned by the physician's medical group
 - Each physician must have a primary practice site listed in the Physician Roster
 - If the physician provides direct patient care services at more than one physical location, the Provider Organization must enter the physician's secondary practice site as well

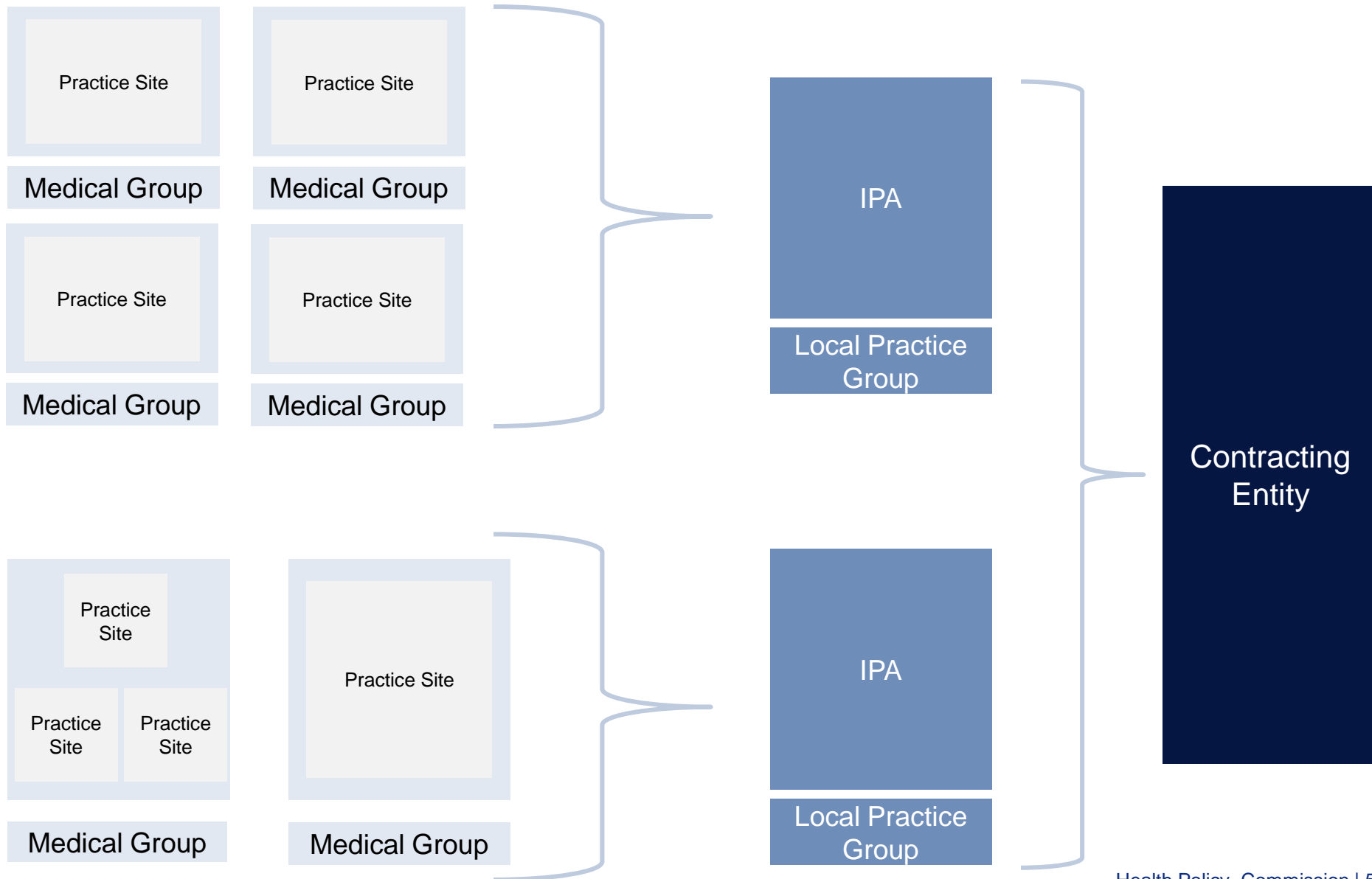
Physician Roster File – Key Terms and Explanations

- A **medical group** is the solo or group practice with which the physician is associated
 - Large medical groups may have multiple practice sites
 - Small medical groups may only have one practice site
 - The medical group may have the same EIN and NPIs as each of its practice sites
 - Some physicians (e.g., hospitalists) may not be members of a medical group

Physician Roster File – Key Terms and Explanations

- A **Local Practice Group** is a group of Health Care Professionals that function as a subgroup of the Provider Organization (i.e., groups broken out from the larger Provider Organization for purposes of data reporting and market comparisons).
 - Other commonly used names for Local Practice Groups include Regional Service Organizations, Local Care Organizations, or Local Care Units
 - Local Practice Groups often include physicians from multiple medical groups who practice in the same region, or who are affiliated with the same hospital
 - A Local Practice Group may or may not be a separate legal Entity
 - Not all Provider Organizations will have Local Practice Groups
 - The HPC strongly recommends scheduling a one-on-one meeting with RPO Program staff to discuss which groups, if any, should be considered Local Practice Groups for your organization

Physician Roster File – Key Terms in Use – One Example



Physician Roster File – Content

- **In the Physician Roster file, you must report each physician on whose behalf the Corporately Affiliated Contracting Entity establishes at least one contract with Carriers or TPAs**
 - You are not required to report physician assistants, nurse practitioners or other providers at this time
 - You are only required to report physicians on whose behalf the Corporately Affiliated Contracting Entity establishes contracts. You are not required to report every physician who has admitting privileges at your hospital(s) or who moonlights at your hospital if you do not establish contracts on their behalf

Physician Roster File – Content

**RPO-90
–
RPO-93**

Physician Name and NPI

See p. 49 of DSM

- Enter the physician's name and NPI

**RPO-94
–
RPO-95**

Physician Specialty

See p. 50 of DSM

- Enter the physician's primary specialty and secondary specialty, if applicable
- The HPC does not require the use of a specific taxonomy; you may use your internal system of classification

RPO-96

Primary Care Physician Status

See p. 50 of DSM

- Indicate whether the physician is a PCP, a specialist, or both
- The HPC is not setting a minimum number of hours per week or minimum amount of clinical hours that you must use to make this determination

Physician Roster File – Content

RPO-97

Pediatrician Status

See p. 50 of DSM

- Indicate whether the physician is a pediatrician
- The HPC is not setting a minimum number of hours per week or minimum amount of clinical hours that you must use to make this determination

RPO-98

Hospitalist Status

See p. 50 of DSM

- Indicate whether the physician is a hospitalist
- The HPC is not setting a minimum number of hours per week or minimum amount of clinical hours that you must use to make this determination

RPO-99

Employed Status

See p. 50 of DSM

- Indicate whether the physician is employed by the Provider Organization or one of its corporate affiliates

Physician Roster File – Content

**RPO-100
–
RPO-108**

Primary Site of Practice

See p. 50 - 51 of DSM

- Provide the following information about the physician's primary site of practice:
 - Name
 - EIN
 - NPI(s)
 - Address

**RPO-109
–
RPO-117**

Secondary Site of Practice

See p. 51 - 52 of DSM

- Provide the following information about the physician's secondary site of practice:
 - Name
 - EIN
 - NPI(s)
 - Address

**RPO-118
–
RPO-120**

Medical Group

See p. 52 - 53 of DSM

- Provide the following information about the physician's medical group
 - Name
 - EIN
 - NPI(s)

Physician Roster File – Content

**RPO-121
–
RPO-123**

Local Practice Group 1

See p. 53 of DSM

- Provide the following information about the physician's Local Practice Group, if any:
 - Name
 - EIN
 - NPI(s)

**RPO-124
–
RPO-126**

Local Practice Group 2

See p. 53 of DSM

- Provide the following information about the physician's second Local Practice Group, if any:
 - Name
 - EIN
 - NPI(s)

Physician Roster File – Input Method

Part 1 Data



N/A

Part 2 Data



Complete the Microsoft Excel template by typing or pasting your answers into the Excel file



Upload the completed template as a file attachment to the online submission platform



If you are required to submit multiple physician rosters, attach a separate Microsoft Excel file for each Corporately Affiliated Contracting Entity



Name each attachment using the following format: “Physician Roster – [Name of Corporately Affiliated Contracting Entity]”

Clinical Affiliations File – Overview

Clinical Affiliations File	
Description:	Includes information about each Entity with which the Provider Organization has a Clinical Affiliation
Extension of Part 1 File:	No
Input Type:	Manual entry Microsoft Excel template import
Applicable to All Provider Organizations:	No

Clinical Affiliations File – Content

Reportable Clinical Affiliations Threshold

1. The Clinical Affiliation must include at least one Entity with which the Provider Organization does not have a Corporate Affiliation; and
2. The Clinical Affiliation must include at least one of the Provider Organization's corporately affiliated Acute Hospitals, or the employed physician group of such an Acute Hospital; and
3. The Clinical Affiliation must include at least one of the following types of relationships that has been memorialized in writing among the affiliates:

Co-branding

The provision of funds to establish or enhance EHR Interconnectivity

Co-located services

Establishment of a preferred provider relationship

Complete or substantial staffing of an Acute Hospital service line

Regular and ongoing receipt of telemedicine services from another Acute Hospital

Clinical Affiliations File – Content

Co-branding

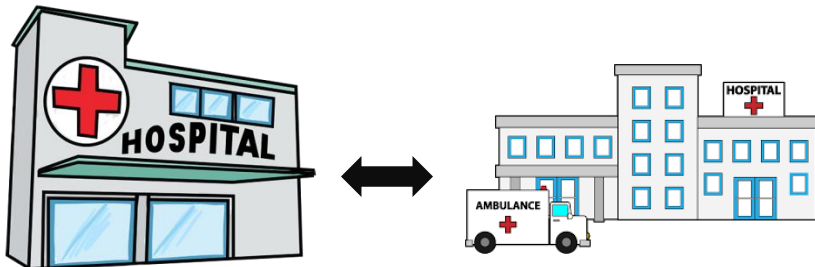
Description

A co-branding relationship is reportable when an Acute Hospital, or its employed physician group, and another Entity have decided to publicize their partnership to the public

Reporting

Reported by the Provider Organization(s) that are corporately affiliated with the Acute Hospital whose brand is being used

Both Hospitals Report



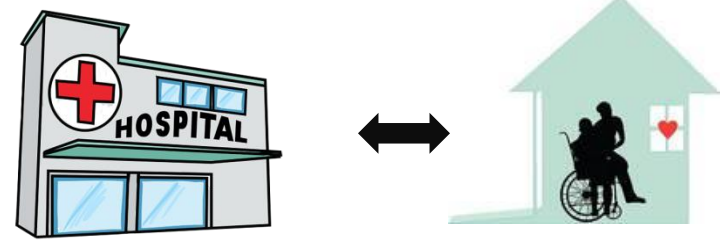
Hospital



Hospital



Hospital Reports



Hospital



Nursing Home

Clinical Affiliations File – Content

Co-located Services

Description

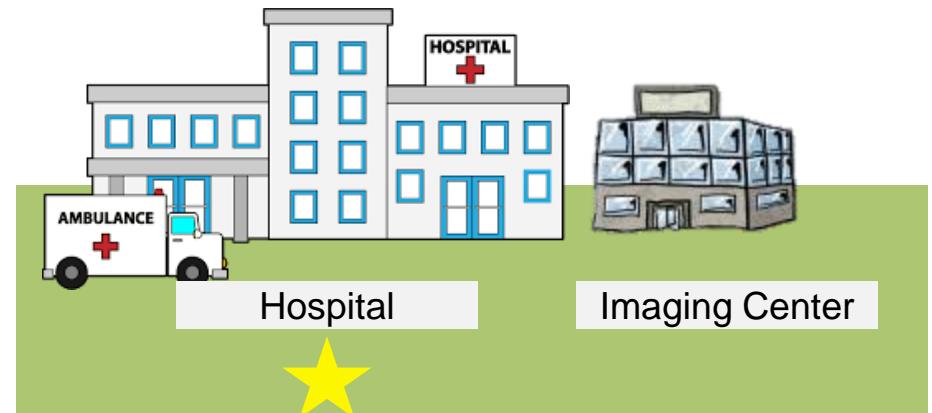
The Provider Organization must report co-located services when another Entity operates a site to provide Health Care Services in, or on the Campus of, the Provider Organization's corporately affiliated Acute Hospital

- Includes the Acute Hospital's main site and satellite locations
- The Entity's site must be fixed in that location
- The Entity must be providing direct patient care services at that site on at least a weekly basis.

Reporting

Reported by the Provider Organization that is corporately affiliated with the Acute Hospital where the co-location is occurring

Hospital where co-location occurs reports



Clinical Affiliations File – Content

Complete or substantial staffing of an Acute Hospital service line

Description

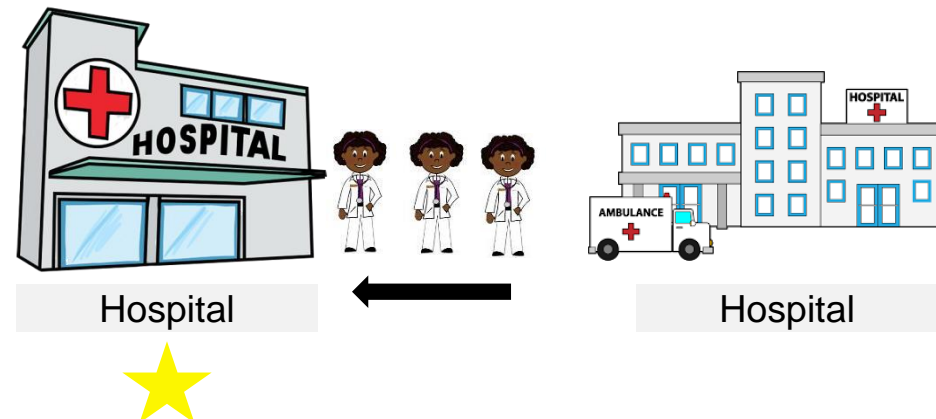
The Provider Organization must report the sharing of physician resources when an Entity with which the Provider Organization is not corporately affiliated is providing complete or substantial staffing of an Acute Hospital inpatient or outpatient service line, either at the main site or a satellite site of the Acute Hospital

- For guidance on what constitutes a service line:
 - See the list in [RPO-88](#)
 - Hospital medicine and intensive care medicine are also included
 - Sub-specialties (e.g. pediatric oncology) do not themselves constitute a service line

Reporting

Reported by the Provider Organization that is corporately affiliated with the Acute Hospital whose service line is being staffed

Reported by Hospital whose service line is staffed



Clinical Affiliations File – Content

The provision of funds to establish or enhance EHR Interconnectivity

Description

The Provider Organization must report the provision of funds to, or receipt of funds from, an Entity with which it is not corporately affiliated for the purpose of establishing or enhancing EHR Interconnectivity between the Entity and at least one of the Provider Organization's Acute Hospitals

Reporting

Reported by Provider Organization that is corporately affiliated with the Acute Hospital with which EHR Interconnectivity is being established or enhanced

Both Hospitals Report



Hospital Reports



Clinical Affiliations File – Content

Establishment of a preferred provider relationship

Description

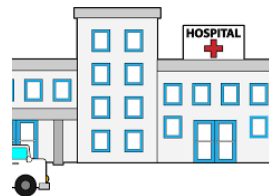
The Provider Organization must report any relationship memorialized in writing that establishes one of the Provider Organization's corporately affiliated Acute Hospitals or the employed physician group of such Acute Hospital as a preferred provider of emergency, tertiary, or specialty care for the patients of an Entity with which the Provider Organization is not corporately affiliated.

Preferred provider relationships for specialty care are limited to: cardiology, obstetrics/gynecology, oncology, orthopedics, and pediatrics.

Reporting

Reported by the Provider Organization that is corporately affiliated with the Acute Hospital or employed physician group that has been designated the preferred provider of care

Hospital designated the preferred provider reports



Hospital



Clinic



Clinical Affiliations File – Content

Regular and ongoing receipt of telemedicine services from another Acute Hospital

Description	Reporting
The Provider Organization must report a relationship in which one of its corporately affiliated Acute Hospitals receives regular, ongoing telemedicine services from another Acute Hospital, or its employed physician group	Reported by the Provider Organization that is corporately affiliated with the Acute Hospital that is receiving telemedicine services

Hospital receiving telemedicine services reports



Clinical Affiliations File – Content

RPO-127

**Legal Name of Clinical
Affiliate**

See p. 60 of DSM

- Provide the legal name of the clinical affiliate

RPO-128

Clinical Affiliate EIN

See p. 60 of DSM

- Enter the 9-digit EIN under which the clinical affiliate operates

Clinical Affiliations File – Content

RPO-129

Participating Acute Hospitals

See p. 60 of DSM

- Enter the legal name of each Acute Hospital that is corporately affiliated with the Registering Provider Organization named in RPO-01 and is participating in this affiliation

RPO-130

Clinical Affiliation Type(s)

See p. 60 of DSM

- Select each type of affiliation that characterizes the relationship:
 - ☐ Co-branding (124)
 - ☐ Co-located services (125)
 - ☐ Complete or substantial physician staffing of an Acute Hospital service line (126)
 - ☐ Provision of funds to establish or enhance EHR interconnectivity (127)
 - ☐ Establishment of a preferred provider relationship (128)
 - ☐ Regular and ongoing receipt of telemedicine services from another Acute Hospital (129)
- If you are using the Microsoft Excel template to complete this file, enter the two-digit answer codes in parentheses into the appropriate cell, separated by a semicolon

Clinical Affiliations File – Content

RPO-131

**Clinical Affiliation Start
Date**

See p. 60 of DSM

- Select the date range that best describes when any Clinical Affiliation with this clinical affiliate began

- ☐ Before 2005
- ☐ 2005-2009
- ☐ 2010-2015

RPO-132

**Description of the
Affiliation**

See p. 61 of DSM

- Describe the nature, scope, and scale of the relationship with this clinical affiliate
- Your description must indicate which service lines are encompassed by the affiliation

Clinical Affiliations File – Content

RPO-133

**Provision or Receipt of
Capital for Service Site
Development**

See p. 61 of DSM

- Indicate whether the Clinical Affiliation includes the provision or receipt of capital for service site development

Clinical Affiliations – Input Method

Part 1 Data



N/A

Part 2 Data



Complete the Microsoft Excel template by typing your answers into the Excel file



Upload the completed template into the online submission platform



If you prefer to enter this information manually into the online submission platform, you may disregard the Excel template

File Attachments - Overview

File Attachments	
Description:	Includes the files that the Provider Organization must upload in either .PDF or Microsoft Excel format.
Extension of Part 1 File:	Yes
Input Type:	File upload only
Applicable to All Provider Organizations:	Yes

File Attachments – Content

RPO-134

Physician Roster

See p. 62 of DSM

- Upload the completed HPC-issued Physician Roster Microsoft Excel template(s) as required

RPO-135

**Corporate
Organizational Chart**

See p. 62 of DSM

- If the corporate organizational chart that you submitted in Part 1 is no longer accurate, upload a revised version
- If your Part 1 corporate organizational chart is still accurate, skip this question

RPO-136

**Affidavit of Truthfulness
and Proper Submission**

See p. 62 of DSM

- Upload a completed version of the HPC-issued Affidavit of Truthfulness and Proper Submission form
- You must submit a new form in Part 2

File Attachments – Input Method

Part 1 Data



Will be prepopulated in the online submission platform



Please review the corporate organizational chart and submit an updated version if necessary

Part 2 Data



Must be uploaded either Microsoft Excel or .PDF attachments, as required in the DSM

Agenda

- Background
- Initial Registration: Part 2
- Online Submission Platform
- Questions



Agenda

- Background
- Initial Registration: Part 2
- Online Submission Platform
- Questions



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Helpful Resources

HPC Website

<http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/>

Regulation 958 CMR 6.00

<http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/registration-of-provider-organizations/rpo-recommended-final-regulation.pdf>

Data Submission Manual

<http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/registration-of-provider-organizations/initial-registration-part-2/data-submission-manual-hpc-rpo-2015-01.pdf>

Forms and Templates

<http://www.mass.gov/anf/budget-taxes-and-procurement/oversight-agencies/health-policy-commission/registration-of-provider-organizations/initial-registration-part-2/>